

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ALLEN SUPPLY
27220006-1
1. MONTH OF MAY 1, 2008 THRU MAY 31, 2008

- | | | | | |
|-----|--|------------------------------------|------------------------------------|--------------------------------------|
| 2. | Is Outlet # (8 digit) Correct? | <input checked="" type="radio"/> Y | N | N/A |
| 3. | Is average Total flow-gal.day stated in space provided? | <input checked="" type="radio"/> Y | N | N/A |
| 4. | Is max. Total flow-gal day stated in space provided? | <input checked="" type="radio"/> Y | N | N/A |
| 5. | Is method used to calculate water stated? | <input checked="" type="radio"/> Y | N | N/A |
| 6. | Are number of working days stated? | <input checked="" type="radio"/> Y | N | N/A |
| 7. | Are there any parameters which have exceeded PVSC Local Limits? | Y | <input checked="" type="radio"/> N | N/A |
| 8. | Is proper compliance/non-compliance statement provided? | <input checked="" type="radio"/> Y | N | N/A |
| 9. | Have correct number of samples been submitted? | <input checked="" type="radio"/> Y | N | N/A |
| 10. | Has PHC result been listed on MR-1 report? | Y | N | <input checked="" type="radio"/> N/A |
| 11. | Has sample number been reported in space provided? | <input checked="" type="radio"/> Y | N | N/A |
| 12. | Have all regulated parameters been listed on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 13. | Has sample type been stated on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 14. | Have all samples been taken during this reporting period? | <input checked="" type="radio"/> Y | N | N/A |
| 15. | Has NJDEPE certified lab been used? | <input checked="" type="radio"/> Y | N | N/A |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | <input checked="" type="radio"/> Y | N | N/A |
| 17. | Have results been written in space designated on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 18. | Is correct method used to preserve samples stated on MR-1? | <input checked="" type="radio"/> Y | N | N/A |
| 19. | Has MR-1 been signed by authorized representative? | <input checked="" type="radio"/> Y | N | N/A |
| 20. | Has information been submitted on proper MR-1 form? | <input checked="" type="radio"/> Y | N | N/A |
| 21. | Remove Arsenic from report if sampling not required | Y | N | <input checked="" type="radio"/> N/A |

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

ALLEN SUPPLY

27220006

First Reviewer: comments on deficiencies completeDate Reviewed 7/8/08 Date sent to user _____Date due back _____ Reviewer C.J.M.

Second review comments on deficiencies

Date Reviewed _____ Date sent to user _____

Date due back _____ Reviewer _____

Date _____ Reviewer _____

PRETREATMENT MONITORING REPORT

NAME: Allen Linen Supply and Laundry Service IncMAILING ADDRESS: 407 20th Ave Paterson N.J. 07513FACILITY LOCATION: 971 E 24th Street Paterson N.J. 07513CATEGORY & SUBPART: 9999OUTLET #: 1CONTACT OFFICIAL: Juan GalarzaTELEPHONE: 973-742-6131NEW CUSTOMER ID / OUTLET ID: 27220006

OLD OUTLET DESIGNATION: _____

MONITORING PERIOD

Start			End		
05	01	08	05	31	08
MO	DAY	YR	MO	DAY	YR

Average

Maximum

Regulated Flow-gal/day _____

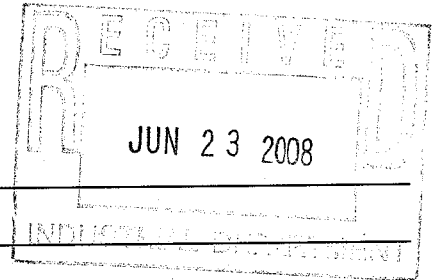
Total Flow-gal/day ~~40000~~ ~~44000~~40,00044,000

Method Used:

1052654 gals x.95= 1000021 Divided by 25

PARAMETER		MASS OR CONCENTRATION			# OF SAMPLES	SAMPLE TYPE COMP/GRAB
		MON AVG	MAXIMUM	UNITS		
Cd	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	0.19		Mg/l		
Cu	Sample Measurement	0.099 ✓		Mg/l	1	Comp
	Permit Requirement	3.02		Mg/l		
Pb	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	0.54		Mg/l		
Hg	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	0.080		Mg/l		
Ni	Sample Measurement			Mg/l	1	Comp
	Permit Requirement	5.9		Mg/l		
Zn	Sample Measurement	0.150 ✓		Mg/l	1	Comp
	Permit Requirement	1.67		Mg/l		
SGT-HEM	Sample Measurement	ND 15.21 ✓		Mg/l	1	Grab
	Permit Requirement			Mg/l		
	Sample Measurement			Mg/l	1	Grab
	Permit Requirement			Mg/l		
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					
	Sample Measurement					
	Permit Requirement					

Production Rate (if applicable)

PRETREATMENT MONITORING REPORT

Certification of Non-Use if applicable (use additional sheets):

Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every

parameter used: Allen Linen is in compliance with the rules and regulations of PVSC

Explain Method for preserving samples: Metals samples taken in glass containers and preserved with nitric acid to a ph less than 2

No te: no changes made to the plot plan for this facility

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

A handwritten signature in black ink, appearing to read "Chris Gomez", written over a horizontal line.

Signature of Principal

Executive or Authorized Agent

Chris Gomez

Operations Manager

Type Name and Title

6/19/08

Date

Allen Linen Process Water Meter Reading

05/01/08 starting water meter reading 82704210gallons

05/31/08 ending meter reading 83756864 gallons

83756864

82704210

1052654gallons

1052654 total gallons for the month of May

1052654 divided by 25 days= 42106 gallons per day

**INTEGRATED ANALYTICAL LABORATORIES
CHAIN OF CUSTODY**

273 Franklin Rd
Randolph, N.J. 07869

[illegible]



ANALYTICAL DATA REPORT

for
Allen Linen
 407 20th Avenue
 Paterson, NJ 07513

Project Name: WASTEWATER
Lab Case Number: E08-05474

MDL = METHOD DETECTION LIMIT

Metals

Lab ID: 05474-001
 Client ID: PROCESS COMPOSITE
 Matrix-Units: Aqueous-mg/L
 Percent Moisture: 100

Date Sampled: 5/15/2008
 Time Sampled: NA
 Date Analyzed: 5/19/08

Parameter	Result	Q	MDL
Copper	0.099		0.008
Zinc	0.150		0.008

General Analytical

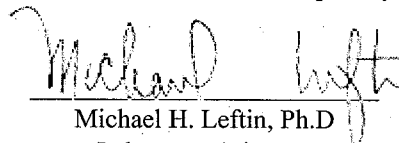
Lab ID: 05474-001
 Client ID: PROCESS COMPOSITE
 Percent Moisture: 100

Date Sampled: 5/15/2008
 Time Sampled: NA

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	701	2.00	Aqueous-mg/L	5/16/2008 8:00
Total Suspended Solids	268	50.0	Aqueous-mg/L	5/20/2008 11:00
Oil & Grease SGT-HEM	ND	5.21	Aqueous-mg/L	5/28/2008 17:00

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:


 Michael H. Leftin, Ph.D.
 Laboratory Director

273 Franklin Road
 Randolph, NJ 07869
 Phone: 973 361 4252
 Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program